



Texas Department of Public Safety  
Regulatory Services Division

**HANDGUN LICENSING**

- MUST USE MOST CURRENT FORM
- PRINT CLEARLY IN BLACK INK OR TYPE
- MAKE SURE SQUARE IS CHECKED

Clearly mark your options.

EXAMPLE:



**LTC INSTRUCTOR DISCLOSURE INFORMATION (OPT-IN LIST)**

**APPLICANT INFORMATION**

Please check all that apply:

- ☐ Certified LTC Instructor
- ☐ First Responder Instructor
- ☐ School Safety Instructor
- ☐ Online Course Provider

**REQUIRED INFORMATION** Please PRINT or TYPE legibly.

**Instructor Certificate #** For department use only – this number will not be published.

**Name:** As it appears on the INSTRUCTOR Certificate – Alternate name in parenthesis.

**OPTIONAL INFORMATION** Provide ONLY the information you wish to have published.

**Website:**

**Email:**

**Phone:** (Numbers only)

By submitting this form, I consent to the publication of the provided information on the department's public website and am waiving any claim of confidentiality relating to this information.

Submit your completed OPT-IN form through email at [RSD\\_LRS\\_LTC@dps.texas.gov](mailto:RSD_LRS_LTC@dps.texas.gov)

\_\_\_\_\_  
Instructor Signature

\_\_\_\_\_  
Date